

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Democratic Women Of Santa Barbara County

ADDRESS (number and street) PO Box 90655 Santa Barbara CA 93190 0655 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00399444 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Report for the: Post-Election, General, Runoff, Special

5. Covering Period 07 01 2006 through 09 30 2006

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 Hebert Signature of Treasurer Electronically Filed by Joan Hebert Date 06 04 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Democratic Women Of Santa Barbara County

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		8715.18
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	6361.32									
(c) Total Receipts (from Line 19) .....	30311.40	41879.92								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	36672.72	50595.10								
7. Total Disbursements (from Line 31) .....	22621.89	36544.27								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	14050.83	14050.83								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Democratic Women Of Santa Barbara County

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	19566.00	27486.00
(i) Itemized (use Schedule A) .....	10735.00	14375.00
(ii) Unitemized .....	30301.00	41861.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	30301.00	41861.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	10.40	18.92
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	30311.40	41879.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	30311.40	41879.92

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	17071.89	26844.27
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	17071.89	26844.27
22. Transfers to Affiliated/Other Party Committees.....	0.00	2000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2300.00	2450.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	.00	0.00
27. Loans Made.....	0.00	.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.....	3250.00	5250.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	22621.89	36544.27
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	22621.89	36544.27

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	30301.00	41861.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30301.00	41861.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17071.89	26844.27
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17071.89	26844.27

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A.</b> Esther J Borah		Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2006	
Mailing Address 517 W Pueblo St		<b>Transaction ID:</b> SA11ai00000000465662	
City State Zip Code Santa Barbara CA 93130	Amount of Each Receipt this Period 1325.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5395.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Joanne Brown		Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2006	
Mailing Address 407 E Padre		<b>Transaction ID:</b> SA11ai00000000466101	
City State Zip Code Santa Barbara CA 93103	Amount of Each Receipt this Period 270.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Joyce Bryan		Date of Receipt M M / D D / Y Y Y Y 07 / 01 / 2006	
Mailing Address 745 Las Alturas Rd		<b>Transaction ID:</b> SA11ai00000000465677	
City State Zip Code Santa Barbara CA 93103	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2095.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A. Michelle Buchman</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 12 / 2006	
Mailing Address 608 Del Norte Rd		<b>Transaction ID:</b> SA11ai00000000465686	
City Ojai	State CA	Zip Code 93023	Amount of Each Receipt this Period 750.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Buchman Family Trust	Occupation Investor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>B. Ron Dexter</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 01 / 2006	
Mailing Address 320 Calle Elegante		<b>Transaction ID:</b> SA11ai00000000466109	
City Santa Barbara	State CA	Zip Code 93108	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer A&D Productions	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2033.00		

Full Name (Last, First, Middle Initial) <b>C. Jill Dexter</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 01 / 2006	
Mailing Address 320 Calle Elegante		<b>Transaction ID:</b> SA11ai00000000465692	
City Santa Barbara	State CA	Zip Code 93108	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer A&D Productions	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2033.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 27
	<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)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A.</b> Jill Dexter		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2006	
Mailing Address 320 Calle Elegante		<b>Transaction ID:</b> SA11ai00000000503568	
City State Zip Code Santa Barbara CA 93108	Amount of Each Receipt this Period 1533.00		
FEC ID number of contributing federal political committee. C	In Kind: Printing for Fundraiser		
Name of Employer Occupation A&D Productions Owner	Aggregate Year-to-Date ▼ 2033.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Ron Dexter		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2006	
Mailing Address 320 Calle Elegante		<b>Transaction ID:</b> SA11ai00000000503569	
City State Zip Code Santa Barbara CA 93108	Amount of Each Receipt this Period 1533.00		
FEC ID number of contributing federal political committee. C	In Kind: Printing for Fundraiser		
Name of Employer Occupation A&D Productions Owner	Aggregate Year-to-Date ▼ 2033.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Jane Eagleton		Date of Receipt M M / D D / Y Y Y Y 07 / 17 / 2006	
Mailing Address PO BOX 5737		<b>Transaction ID:</b> SA11ai00000000465703	
City State Zip Code Santa Barbara CA 93150	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation N/A Retired	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3566.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A. George Eagleton</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 17 / 2006	
Mailing Address PO Box 5737		<b>Transaction ID: SA11ai00000000466115</b>	
City Santa Barbara	State CA	Zip Code 93150	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Doreen Farr</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address 975 Fredensborg Canyon Rd.		<b>Transaction ID: SA11ai00000000465706</b>	
City Solvang	State CA	Zip Code 93463	Amount of Each Receipt this Period 225.00
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C. Ann Fox</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2006	
Mailing Address PO Box 1320		<b>Transaction ID: SA11ai00000000466116</b>	
City Summerland	State CA	Zip Code 93067	Amount of Each Receipt this Period 235.00
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	960.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A.</b> Allyn Ann Gaynes McLerie		Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2006
Mailing Address 3344 Campanil Dr		<b>Transaction ID:</b> SA11ai00000000465693
City Santa Barbara	State CA	
Zip Code 93109	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Marilyn Gevirtz		Date of Receipt M M / D D / Y Y Y Y Y 07 / 01 / 2006
Mailing Address 2929 E Valley Rd		<b>Transaction ID:</b> SA11ai00000000465695
City Santa Barbara	State CA	
Zip Code 93108	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00
Name of Employer N/A	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ghita Ginberg		Date of Receipt M M / D D / Y Y Y Y Y 07 / 31 / 2006
Mailing Address 11 La Flecha Ln		<b>Transaction ID:</b> SA11ai00000000498479
City Santa Barbara	State CA	
Zip Code 93106	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 50.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 27
	<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)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A. Sophia Haimovitz</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2006	
Mailing Address 1059 Summit Rd		<b>Transaction ID: SA11ai00000000465736</b>	
City State Zip Code Santa Barbara CA 93108	Amount of Each Receipt this Period 225.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 225.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Danute V Handy</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 02 / 2006	
Mailing Address 46 Nicholas Ln		<b>Transaction ID: SA11ai00000000498480</b>	
City State Zip Code Santa Barbara CA 93108	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A Occupation Homemaker	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Joan Hebert</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2006	
Mailing Address 5455 8th St #66		<b>Transaction ID: SA11ai00000000465738</b>	
City State Zip Code Carpinteria CA 93013	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 1600.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	925.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A.</b> Judi Henteloff		Date of Receipt M M / D D / Y Y Y Y 07 / 01 / 2006	
Mailing Address 331 Vista Pacifica		<b>Transaction ID:</b> SA11ai00000000465696	
City State Zip Code Santa Barbara CA 93109	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 265.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Nancy Johnson		Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2006	
Mailing Address 149 Palm Court Dr.		<b>Transaction ID:</b> SA11ai00000000465756	
City State Zip Code Santa Maria CA 93454	Amount of Each Receipt this Period 235.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 235.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Mary Kelly		Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2006	
Mailing Address 509 Drury Lane		<b>Transaction ID:</b> SA11ai00000000466119	
City State Zip Code Baltimore MD 21229	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Employed Occupation Tax Accountant	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	935.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 27
	<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)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A. Terry Kelly</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2006	
Mailing Address 1007 Hillside Av		<b>Transaction ID:</b> SA11ai00000000465758	
City State Zip Code Madison WI 53705	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Dorris Kuhns</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 05 / 2006	
Mailing Address 123 Olive Mill Rd		<b>Transaction ID:</b> SA11ai00000000465762	
City State Zip Code Santa Barbara CA 93108	Amount of Each Receipt this Period 270.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 270.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. David Landecker</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 01 / 2006	
Mailing Address 2101 Mountain Av		<b>Transaction ID:</b> SA11ai00000000498482	
City State Zip Code Santa Barbara CA 93101	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	820.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A.</b> Nancy Miller		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2006	
Mailing Address 711 W Ortega St #9		<b>Transaction ID:</b> SA11ai00000000465739	
City State Zip Code Santa Barbara CA 93101	Amount of Each Receipt this Period 1200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Nordman Cormany Hair & Co-mpton LLP	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Jan M Montgomery		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2006	
Mailing Address 942 Via Fruteria		<b>Transaction ID:</b> SA11ai00000000465750	
City State Zip Code Santa Barbara CA 93110	Amount of Each Receipt this Period 370.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Jean M Perloff		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2006	
Mailing Address 1384 Plaza Pacifica		<b>Transaction ID:</b> SA11ai00000000465715	
City State Zip Code Santa Barbara CA 93108	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1820.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A.</b> Jane W Prettyman		Date of Receipt MM / DD / YYYY 07 / 06 / 2006
Mailing Address 230 W Figueroa St		<b>Transaction ID:</b> SA11ai00000000465757
City Santa Barbara	State CA	Zip Code 93101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 235.00
Name of Employer Jane Wardlow Prettyman	Occupation Writer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ilene Pritikin		Date of Receipt MM / DD / YYYY 07 / 29 / 2006
Mailing Address 222 Meigs Rd #13		<b>Transaction ID:</b> SA11ai00000000498495
City Santa Barbara	State CA	Zip Code 93109
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ann Hurst Rojas		Date of Receipt MM / DD / YYYY 07 / 01 / 2006
Mailing Address PO BOX 41823		<b>Transaction ID:</b> SA11ai00000000465698
City Santa Barbara	State CA	Zip Code 93140
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 235.00
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>570.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic Women Of Santa Barbara County

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

Mailing Address 915 Calle Malaga

City State Zip Code  
Santa Barbara CA 93109

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

Name of Employer Occupation  
Santa Barbara Aviation, Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 14 / 2006

Transaction ID: SA11ai00000000465772

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1120 Alemada Padre Serra

City State Zip Code  
Santa Barbara CA 93103

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

Name of Employer Occupation  
Cisco Systems Software Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 31 / 2006

Transaction ID: SA11ai00000000498496

Amount of Each Receipt this Period  
100.00

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

Mailing Address 4400 Via Abridada

City State Zip Code  
Santa Barbara CA 93110

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

Name of Employer Occupation  
N/A Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3320.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 29 / 2006

Transaction ID: SA11ai00000000465742

Amount of Each Receipt this Period  
3320.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3670.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A.</b> Louise Stone		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006	
Mailing Address 2753 Miradero Dr		<b>Transaction ID:</b> SA11ai00000000465778	
City State Zip Code Santa Barbara CA 93105	Amount of Each Receipt this Period 235.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 235.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Nancy Terman		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006	
Mailing Address 3914 Stacy Ln		<b>Transaction ID:</b> SA11ai00000000465779	
City State Zip Code Santa Barbara CA 93110	Amount of Each Receipt this Period 270.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SBUSD Occupation Teacher	Aggregate Year-to-Date ▼ 270.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Thomas Urban		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2006	
Mailing Address 232 Las Ondas		<b>Transaction ID:</b> SA11ai00000000465773	
City State Zip Code Santa Barbara CA 93109	Amount of Each Receipt this Period 235.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 235.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 27
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A.</b> Janet J Wolf		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2006	
Mailing Address 4721 Via Los Santos		<b>Transaction ID:</b> SA11ai00000000465776	
City State Zip Code Santa Barbara CA 93111	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Janet J. Wolf MS	Occupation Vocational Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Catherine Woodford		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2006	
Mailing Address 1707 Garden St		<b>Transaction ID:</b> SA11ai00000000498497	
City State Zip Code Santa Barbara CA 93101	Amount of Each Receipt this Period 715.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Catherine Woodford	Occupation Planned Parenthood		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 715.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	915.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	1956.00

**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 19 / 27

<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)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A. Bill's Copy Shop</b>		<b>Transaction ID:</b> SB21b00000000465635 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 1236 State St		Amount of Each Disbursement this Period 247.83
City Santa Barbara State CA Zip Code 93101	Purpose of Disbursement Copies for Non-Candidate Fundraiser Candidate Name	
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) ▼	Category/Type 003

Full Name (Last, First, Middle Initial) <b>B. Jill Dexter</b>		<b>Transaction ID:</b> SB21b00000000465631 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 6 / 2 0 0 6
Mailing Address 320 Calle Elegante		Amount of Each Disbursement this Period 1290.85
City Santa Barbara State CA Zip Code 93108	Purpose of Disbursement Flowers for Non-Cand. Fundraiser Candidate Name	
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) ▼	Category/Type 003

Full Name (Last, First, Middle Initial) <b>C. Jill Dexter</b>		<b>Transaction ID:</b> SB21b00000000503575 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 6
Mailing Address 320 Calle Elegante		Amount of Each Disbursement this Period 1533.00
City Santa Barbara State CA Zip Code 93108	Purpose of Disbursement In Kind: Printing, Non-Cand. Fundraiser Candidate Name	
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) ▼	Category/Type 003

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

3071.68

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 27

<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)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A. Ron Dexter</b>		<b>Transaction ID:</b> SB21b00000000503576 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 3 / 2 0 0 6
Mailing Address 320 Calle Elegante		Amount of Each Disbursement this Period 1533.00
City Santa Barbara State CA Zip Code 93108	Purpose of Disbursement In Kind: Printing, Non-Cand. Fundraiser Candidate Name	
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) ▼	Category/Type 003

Full Name (Last, First, Middle Initial) <b>B. DLA Enterprises</b>		<b>Transaction ID:</b> SB21b00000000465637 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 6
Mailing Address PO Box 3067		Amount of Each Disbursement this Period 371.74
City Santa Barbara State CA Zip Code 93130	Purpose of Disbursement Photos for Non-Candidate Fundraiser Candidate Name	
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) ▼	Category/Type 003

Full Name (Last, First, Middle Initial) <b>C. Doubletree Hotel</b>		<b>Transaction ID:</b> SB21b00000000465630 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 6
Mailing Address 633 E Cabrillo Bl		Amount of Each Disbursement this Period 8845.17
City Santa Barbara State CA Zip Code 93103	Purpose of Disbursement Room Rental for Non-Cand. Fundraiser Candidate Name	
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) ▼	Category/Type 003

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

10749.91

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 27

<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)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A. Doubletree Hotel</b>		<b>Transaction ID:</b> SB21b00000000503563 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 6
Mailing Address 633 E Cabrillo Bl		Amount of Each Disbursement this Period 50.00
City Santa Barbara State CA Zip Code 93103	Purpose of Disbursement Room Rental for Non-Cand. Fundraiser Candidate Name	
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) ▼	Category/Type 003

Full Name (Last, First, Middle Initial) <b>B. Echo Communications</b>		<b>Transaction ID:</b> SB21b00000000503562 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 6
Mailing Address 924 Chapala St., # D		Amount of Each Disbursement this Period 84.00
City Santa Barbara State CA Zip Code 93101	Purpose of Disbursement Telephone Answering Candidate Name	
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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. Mary Lattin</b>		<b>Transaction ID:</b> SB21b00000000465634 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 6
Mailing Address 3880 Foothill Rd		Amount of Each Disbursement this Period 800.00
City Carpinteria State CA Zip Code 93013	Purpose of Disbursement Accounting for Non-Cand. Fundraiser Candidate Name	
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) ▼	Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	934.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

PAGE 22 / 27

<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)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A. Mary Lattin</b>		<b>Transaction ID:</b> SB21b00000000498498 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 6
Mailing Address 3880 Foothill Rd		Amount of Each Disbursement this Period 500.00
City Carpinteria State CA Zip Code 93013	Purpose of Disbursement Office Staff Candidate Name Category/Type: 001	
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. Mary Lattin</b>		<b>Transaction ID:</b> SB21b00000000498499 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 6
Mailing Address 3880 Foothill Rd		Amount of Each Disbursement this Period 500.00
City Carpinteria State CA Zip Code 93013	Purpose of Disbursement Office Staff Candidate Name Category/Type: 001	
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. Mary Lattin</b>		<b>Transaction ID:</b> SB21b00000000503564 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 3880 Foothill Rd		Amount of Each Disbursement this Period 500.00
City Carpinteria State CA Zip Code 93013	Purpose of Disbursement Office Staff Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial)

**A.** Santa Barbara News-Press

Mailing Address 715 Anacapa St

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement  
Ad for Non-Cand. Fundraiser

Candidate Name

004  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21b00000000465626

Date of Disbursement

07 / 25 / 2006

Amount of Each Disbursement this Period

423.96

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

423.96

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

16679.55

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A. Feingold Senate Committee</b>		Transaction ID: SB23000000000465628 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 6
Mailing Address PO Box 620062		Amount of Each Disbursement this Period 1000.00
City Middleton State WI Zip Code 53562	003 Category/ Type	
Purpose of Disbursement Political Contribution		
Candidate Name Russell Feingold		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 00	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends Of Lois Capps</b>		Transaction ID: SB23000000000465701 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6
Mailing Address PO Box 23940		Amount of Each Disbursement this Period 300.00
City Santa Barbara State CA Zip Code 93121	011 Category/ Type	
Purpose of Disbursement Political Contribution		
Candidate Name Lois Capps		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 23	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jill Martinez For Congress</b>		Transaction ID: SB23000000000465694 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6
Mailing Address 1212 Victory Bl		Amount of Each Disbursement this Period 1000.00
City Burbank State CA Zip Code 91502	011 Category/ Type	
Purpose of Disbursement Political Contribution		
Candidate Name Jill Martinez		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 2300.00

**TOTAL** This Period (last page this line number only) ..... ► 2300.00



**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)

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<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial) <b>A. Angelides 2006 (Phil)</b>		Transaction ID: SB29000000000465644 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6
Mailing Address 1331 21st St		Amount of Each Disbursement this Period 1000.00
City Los Angeles State CA Zip Code 90017	Purpose of Disbursement Political Contribution to Non-Fed Cand.	
Candidate Name Phil Angelides - CA		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Democratic Service Club Of Santa Barbara</b>		Transaction ID: SB29000000000465643 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 2 / 2 0 0 6
Mailing Address 402 E Gutierrez		Amount of Each Disbursement this Period 600.00
City Santa Barbara State CA Zip Code 93101	Purpose of Disbursement Civic Donation	
Candidate Name		012 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Janet Wolf For Supervisor</b>		Transaction ID: SB29000000000465697 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6
Mailing Address 3892 State St		Amount of Each Disbursement this Period 1000.00
City Santa Barbara State CA Zip Code 93105	Purpose of Disbursement Political Contribution to Non-Fed Cand.	
Candidate Name Janet Wolf		011 Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 27

<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Democratic Women Of Santa Barbara County

Full Name (Last, First, Middle Initial)

**A.** Vote No On Prop 85, Sponsored By Feminist Majority Foundation

Mailing Address 555 Capitol Mall #510

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Political Contribution to Non-Fed Comm.

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29000000000465642

Date of Disbursement

08 / 17 / 2006

Amount of Each Disbursement this Period

400.00

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

400.00

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

3000.00

**Image# 27930761033**

Form/Schedule: **SB21b** 8/26/06, \$1,290.85, Rose Story Farm, 5930 Casitas Pass Rd., Carpinteria, CA 93013, Flowers for Non-Candidate  
Fundraiser  
Transaction ID: **SB21b00000000465631**

\*\*\*\*\*