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### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Auti	Torized Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Santa Clara County D	emocratic Club		
ADDRESS (number and street)	1009 Blossom River Way		
▼ (number and street)	apt 225		
Check if different than previously reported. (ACC)	San Jose		CA 95123  -
2. FEC IDENTIFICATION N	UMBER ▼ CIT	YA	STATE ▲ ZIP CODE ▲
C C00419028		S THIS NEW (N) O	AMENDED (A)
		EPORT (N) O	R (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M	(Non-Election Year Only)
April 15		20 (M4) Jul 20 (M7	7) Oct 20 (M10) Jan 31 (YE)
Quarterly Report (0	(C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report (0	Report for the:	Convention (12C)	Special (12S)
Quarterly Report (0		M = M / D = D	in the
Year-End Report (` July 31 Mid-Year	,	n on	State of
Report (Non-electic Year Only) (MY)	on (d) 30-Day  POST-Election  Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)		n on	in the State of
5. Covering Period 0		through 09	M / D D / Y Y Y Y Y 30 2018
I certify that I have examined the	nis Report and to the best of	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure	Barrett, William, Avon, Dr.,		
Signature of Treasurer	rett, William, Avon, Dr.,	[Electronically Filed]	Date 11 30 7 2018
NOTE: Submission of false, error	neous, or incomplete information	n may subject the person signin	g this Report to the penalties of 52 U.S.C. § 3010
Office Use			FEC FORM 3X Rev. 05/2016

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

### Santa Clara County Democratic Club

Report Covering the Period: From: 07 01 2018 To: 09 30 2018

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2018		1319.83
	(b) Cash on Hand at Beginning of Reporting Period	404.99	
	(c) Total Receipts (from Line 19)	656.03	741.19
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1061.02	2061.02
7.	Total Disbursements (from Line 31)	806.00	1806.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	255.02	255.02
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	50.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

#### Santa Clara County Democratic Club

01 2018 09 30 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 0.00 0.00 (i) Itemized (use Schedule A)..... 656.03 741.19 (ii) Unitemized ..... (iii) TOTAL (add 741.19 656.03 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees ..... (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 741.19 656.03 Totals to Line 33, page 5) .....▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ....... (c) Total Transfers (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))....... 656.03 741.19 20. Total Federal Receipts 656.03 741.19 (subtract Line 18(c) from Line 19) .......▶

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Operating Expenditures:     (a) Allocated Federal/Non-Federal     Activity (from Schedule H4)	10.01 1.110 1 0.100	Galeridai Teal-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	4 4	7 7 7
Expenditures	0.00	0.00
(c) Total Operating Expenditures	0.00	0.00
(add 21(a)(i), (a)(ii), and (b))	0.00	0.00
Committees	0.00	1000.00
Contributions to Federal Candidates/Committees	7 7 7	4 4 4
and Other Political Committees	806.00	806.00
Independent Expenditures (use Schedule E)	0.00	0.00
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	4 4	
(use Schedule F)	0.00	0.00
Land Danaumanta Mada		
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other	4 4	
Than Political Committees	0.00	0.00
(b) Delitical Danta Committee		
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		4 4
(add Lines 28(a), (b), and (c))▶	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101(	30//	4 4
(a) Allocated Federal Election Activity	20))	
(from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) III ovinil Chara		
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	908 00	1906 00
,,,,,,,,,,	806.00	1806.00
Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	806.00	1806.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
3. Total Contributions (other than loans) (from Line 11(d), page 3)	656.03	741.19	
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	656.03	741.19	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00	

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only 21b 28a		
Any information copied from such Reports and Staten or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) Santa Clara County Democratic Cl	lub			
Full Name (Last, First, Middle Initial)  A. CAMPA-NAJJAR, AMMAR, , ,  Mailing Address 14533 OLIVE VISTA DRIVE		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
,	State Zip Code		FEC Identification Number	
JAMUL Purpose of Disbursement contribution Candidate Name  Office Sought:     House   Disburser	urpose of Disbursement ontribution 011 andidate Name Category			
Senate President State: CA District: 50	Primary <b>★</b> General Other (specify) ▼		Memo Item	
Full Name (Last, First, Middle Initial)  B. COX, TERRANCE JOHN (TJ), , ,  Mailing Address PO BOX 804		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
SELMA Purpose of Disbursement campaign  Candidate Name  COX, TERRANCE JOHN (TJ), , ,  Office Sought:   House  Disbursement  Disbursement  Disbursement  Disbursement  Disbursement  Disbursement	State Zip Code 93662  ment For: 2018 Primary X General Other (specify)	011 Category/ Type	FEC Identification Number  C H8CA10167  Transaction ID : SB23.10166  Amount of Each Disbursement this Period  110.00  Memo Item	
Full Name (Last, First, Middle Initial)  C. HARDER, JOSH, , ,  Mailing Address P.O. BOX 4426		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City MODESTO Purpose of Disbursement campaign Candidate Name	012 Category/ Type	FEC Identification Number  C H8CA10126  Transaction ID : SB23.10196  Amount of Each Disbursement this Period		
Office Sought:    X   House   Disburser	ment For: 2018 Primary   General Other (specify) ▼		Memo Item	
SUBTOTAL of Disbursements This Page (optional)		·····•	240.00	
TOTAL This Period (last page this line number only)	)			

SC	HEDULE B (FEC Form 3X)	Use separate schedule(s)  FOR LINE		NUMBER: PAGE 7 OF 9			
ITE	MIZED DISBURSEMENTS		rate schedule(s) category of the	(check only		<b>□</b>	
			Summary Page	21b 28a	22 <b>x</b> 23 28c 28c	26 27 29 30b	
Λον	information copied from such Reports and Statem	l nonto mov n	ot he cold or use				
	or commercial purposes, other than using the nam						
1	NAME OF COMMITTEE (In Full)						
$\rangle$ :	Santa Clara County Democratic Clu	ub					
<u>/</u>							
_	Full Name (Last, First, Middle Initial)				Date of Disburseme	ent	
	JANZ, ANDREW, , ,				M M / D D	/ Y Y Y Y	
N	Mailing Address 16633 VENTURA BLVD., #1008				08 17	2018	
_							
	City SENCINO	State CA	'		FEC Identification N	Number	
_	Purpose of Disbursement	CA 91436			C H0CA22120		
	campaign contribution			011	Transaction ID : SB23.10169 Amount of Each Disbursement this Period		
7	Candidate Name			Category/			
	JANZ, ANDREW, , ,			Туре			
(		nent For: 2				150.00	
		Primary Other (spec	General				
5	State: CA District: 22	Other (spec	iiy) <b>▼</b>		Memo Item		
F	Full Name (Last, First, Middle Initial)						
В.	LEVIN, MIKE, , ,				Date of Disburseme	ent	
_					M M / D D / Y Y Y Y		
N	Mailing Address 3605 LONG BEACH BLVD., SUITE	E 426			08 22 2018		
-	Dity	State Zip Code					
	LONG BEACH	CA	90807		FEC Identification N	Number	
	Purpose of Disbursement campaign			1	С нвса49058		
	Campaign Candidate Name		[	011	Transaction ID : SB23.10176 Amount of Each Disbursement this Period		
	LEVIN, MIKE, , ,			Category/			
	LEVIN, MIKE, , , Type  Office Sought:			туре		140.00	
		Primary	<b>✗</b> General		4	4 4	
President Other (specify)				Memo Item			
	State: CA District: 49						
_	Full Name (Last, First, Middle Initial)				Data of Dishuraam	ont.	
<b>.</b>	Lofgren, Zoe, , ,				Date of Disburseme		
_ N	Mailing Address P.O. Box 913				08 06 2018		
_							
	,	State	Zip Code		FEC Identification N	Number	
	San Jose Purpose of Disbursement	CA	95113				
	cash 011				C Transaction ID	A . CD22 10175	
(	Candidate Name	ate Name Category/				sbursement this Period	
_	Zoe Lofgren For Congress						
Office Sought: House Disbursement For: 2018					4	200.00	
		Primary Other (spec	General				
5	State: District:		Memo Item				
	L						
SU	BTOTAL of Disbursements This Page (optional)				7	490.00	
TO	TAL This Period (last page this line number only).						

	CHEDULE B (FEC Form 3X)	Llos congreto cohodulo(s)		NUMBER: PAGE 8 OF 9			
T	EMIZED DISBURSEMENTS	for each category of the		(check only 21b	(check only one) 21b 22 <b>x</b> 23 26 2		
		Detailed Summary Page		28a	28b 28c	29 30b	
	y information copied from such Reports and Staten						
or	for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	ne and addre	ess of any politica	ai committee to	solicit contributions	from such committee.	
$\rangle$	Santa Clara County Democratic Cl	ub					
Λ	Full Name (Last, First, Middle Initial)				Date of Disbursen	nent	
٦.	ROUDA, HARLEY E JR, , ,				M M / D I		
	Mailing Address 120 NEWPORT CENTER DR				08 24	2018	
	# 28 City	State	Zip Code		FFO Identification	Niversia	
	NEWPORT BEACH	CA	92660	92660			
	Purpose of Disbursement campaign contribution			011	C H8CA48035		
	Candidate Name			Category/		D: SB23.10178 Disbursement this Period	
	Office Cought   House   Dishurses	namt Fam. O	0.4.0	Туре		76.00	
	Office Sought: House Disburser Senate	ment For: 20 Primary	018 <b>X</b> General		70.00		
	President	Other (spec	ify) ▼		Memo Item		
	State: CA District: 48  Full Name (Last, First, Middle Initial)						
3.	Tuli Name (Last, First, Windle Initial)				Date of Disbursen	nent	
					M = M / D = D / Y = Y = Y		
	Mailing Address						
	City	State	Zip Code		FEC Identification	Number	
	Purpose of Disbursement  Candidate Name  Category/ Type				C		
					Amount of Each [	Disbursement this Period	
	Office Sought: House Disbursement For:			71			
		Senate Primary General  President Other (specify)				·	
	State: District:				Memo Item		
_	Full Name (Last, First, Middle Initial)				Data of Dishaman		
٠.					Date of Disbursen		
	Mailing Address						
	City	State	Zip Code		FEC Identification	Number	
	Purpose of Disbursement				С		
	Candidate Name  Category/ Type  Office Sought: House Disbursement For:				Amount of Each D	Disbursement this Period	
						4	
	Senate Primary General President Other (specify) ▼						
	State: District:		·· <i>J</i> / •		Memo Item		
_	IIDTOTAL of Diskussesses This Day (s. 1)					76.00	
5	UBTOTAL of Disbursements This Page (optional)			·····	1 1 7	7 7	
Т	OTAL This Period (last page this line number only)					806.00	

# SCHEDULE C (FEC Form 3X) LOANS

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

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		Detailed Sulfillary Page FOR LINE 13 OF FORM 3X			
AME OF COMMITTEE (In Full)		Transaction ID: SC/9.9960			
Santa Clara County Democratic C	lub				
LOAN COURCE Full Name /Lock First M	iddle leitiel)	N			
LOAN SOURCE Full Name (Last, First, M Santa Clara County Democratic Club	iddie initial)	rimary			
		General			
Mailing Address 1009 Blossom River Way		Other (specify) ▼			
apt 225					
City	State	ZIP Code			
San Jose	CA	95123			
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period			
50.00	7	0.00			
TERMS	_				
Date Incurred	Da	ate Due Interest Rate Secured:			
05 18 2016		7/15/2016 0.00 % (apr) Yes X No			
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)	'	Name of Employer			
Mailing Address		Occupation			
	T				
City	ZIP Code	Amount Guaranteed			
3. Full Name (Last, First, Middle Initial)		Outstanding:			
5. Full Name (Last, First, Middle Illitial)		Name of Employer			
Mailing Address		Occupation			
3		Occupation			
City	ZIP Code	Amount			
		Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
Walling Address		Оссираноп			
City	ZIP Code	Amount			
		Guaranteed Outstanding:			
SUBTOTALS This Period This Page (optional)					
TOTALS This Period (last page in this line only	y)				
One contract the desired to the contract of th	Ladala B. C. (C.)	line If we Oakedele D. compference if			
Carry outstanging palance only to LINE 3. Sc	neaule D. for this	line. If no Schedule D, carry forward to appropriate line of Summary.			